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Bib Data Sheet

CONFIRMATION NO. 2963

<b>SERIAL NUMBER</b> 10/010,748	<b>FILING DATE</b> 11/13/2001 <b>RULE</b>	<b>CLASS</b> 713	<b>GROUP ART UNIT</b> 2182	<b>ATTORNEY DOCKET NO.</b> 5681-08000	
<b>APPLICANTS</b> Robert Byrne, Voiron, FRANCE; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/16/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> <i>N/R</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 31	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> Robert C. Kowert Conley, Rose, & Tayon, P.C. P.O. Box 398 Austin, TX 78767					
<b>TITLE</b> Filter-based attribute value access control					
<b>FILING FEE RECEIVED</b> 1236	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		